



PERMIT APPLICATION

SPECIAL EVENTS

Complete and return this application to City Hall at least 60 calendar days prior to the starting date of the event. Even if this is a recurring yearly event, a new application must be submitted each year.

Name of Event: _____

Date of Event: _____ Hours of Event: _____

Location of Event: _____

Purpose of Event: _____

Type of Event: Non-profit For-profit Associated non-profit

Sponsoring Organization:

Organization Name: _____ Phone: _____

Address: _____ Use as Mailing Address

Mailing Address: _____

Owner/President Name: _____ Phone: _____

Email Address: _____

Contact Person on Day of Event (if different from above): _____

Contact Person Email/Phone No: _____

Will sidewalks be used? Yes No

(If yes, include detailed map outlining sidewalks to be used. Sidewalks must be accessible for pedestrian traffic.)

Describe sidewalk use: _____

Will street closures be necessary? Yes No

(If yes, include detailed map indicating road closures, emergency vehicle access, barricade locations.)

Street closed – Date/Time: _____

Street re-opened – Date/Time: _____

Describe Street Closures: _____

Will parking lot closures be necessary? Yes No

(If "yes," include detailed map indicating proposed closures/barricade locations.)

Parking lot(s) closed – date/time: _____

Parking lot(s) re-opened – date/time: _____

Describe parking lot closures: _____

Estimated Daily Attendance: _____

Describe crowd control plans for day of event: _____

Describe Special Event's impact on adjacent commercial/residential property: _____

A signature form acknowledging event must be attached from adjacent commercial/residential properties.

Will the following be constructed/located in event area?

Booths (quantity) _____ Tents (quantity) _____ Awnings (quantity) _____ Canopies (quantity) _____

Rides* (quantity) _____ Tables (quantity) _____ Portable toilets (quantity) _____ (may be required)

Other (describe) _____

*NOTE: No stakes of any kind are allowed in asphalt. The State building code requires that building permits be pulled for tents any larger than a 10' X 10' pop-up. These permits should be provided by the tent rental company and can be pulled closer to the time of your event. *Additional insurance coverage will be required.*

Attach a MAP including:

OTHER REQUIREMENTS:

Will sound be amplified during event? Yes No

If yes, Sound Amplification Equipment Registration Statement must be completed and attached with receipt of payment.

Will the event have food, beverage or concession? Yes No

If "yes," Health Department approvals and temporary food license required.

Do you plan to serve alcohol at this event? Yes No

If "yes," Liquor Liability Insurance is required.

Do you plan to have special event signs and/or banners ? Yes No

If "yes," signs must conform to City ordinances.

MUNICIPAL SERVICES:

Please note that the event will be billed for municipal service required. Do you believe the event will require:

Fire Department

Water/ Clean Up: Yes No

Police Department

Security and Traffic Control: Yes No

If no, how are you managing security/traffic control for the event:

Department of Public Works

Barricade for Street Closures Yes No

If yes, will you be picking them prior to the event and placing them out Yes No

Trash Receptacles Yes No

If yes, will you be picking them prior to the event and placing them out Yes No

Please note it is the event’s responsibility to manage trash and is required to empty any City receptacle that is impacted by the event.

Traffic cones (quantity) _____

Do you need electricity for this event? Yes No

(If "yes," include proposed locations on event layout.)

If you do not identify all proposed locations that need electricity, the City cannot guarantee electricity will be made available for the duration of your event.

Other Services/Equipment (describe): _____

The applicant and sponsoring organization understands and agrees to:

Provide a certificate of insurance for all coverages deemed necessary for the event, name the City of Mason as an additional insured on all applicable policies, and submit the certificate to City Hall no later than one week following notice of the event approval.

Comply with all City and County ordinances and applicable State laws, City policies and acknowledges that the special events permit does not relieve the applicant or sponsoring organization from meeting any application requirements of law or other public bodies or agencies.

Promptly pay any billing for City services which may be rendered or deemed necessary as part of the event and event approval.

Applicant and sponsoring organization further understands the approval of this special event may include additional requirements and/or limitations based on the City's review of this application. The applicant and sponsoring organization understands that it may be necessary to meet with City staff during the review of this application and that City Council approval is necessary. The applicant agrees the sponsoring organization will operate the event in conformance with the written approval.

Application Checklist

(Failure to provide necessary documentation will delay application review and approval.)

Check the following items that are attached when submitted:

- _____ ATTACHMENT A: Completed application
- _____ ATTACHMENT B: Event map (includes detailed event layout for vendors, rides, booths, electrical needs, etc.) Detailed plan showing road closures, sidewalk use, etc.
- _____ ATTACHMENT C: Indemnification
- _____ ATTACHMENT D, IF APPLICABLE: Sound Amplification Equipment Registration Statement

Items to be provided within a week of event

- _____ Copy of Health Department approvals and temporary food license(s) (for ALL food and beverage vendors)
- _____ Certificate of Insurance and Indemnification (Due to City Administrator's Office one week following notice of event approval.)Liquor Liability Insurance (if serving alcohol)

Applicant understands that he/she (or the sponsoring organization) is responsible for contacting the Michigan Liquor Control Commission and/or the County Health Department to secure any and all permits required for this event.

As the duly authorized agent of the sponsoring organization, I hereby apply for approval of this Special Event and affirm the above understandings. The information provided on this application is true and complete to the best of my knowledge.

Indemnity, Hold Harmless, and Insurance Agreement

In consideration of the closing of the public street and permitting its use by _____
(Name of Company)

on the _____ day of _____, 20_____, to the fullest extent permitted by law, the
 _____ *agrees to defend, pay on behalf of, indemnify, and hold harmless the*
(Name of Company)

City of Mason, its elected and appointed officials, employees, agents and volunteers, and others working on behalf of the City of Mason against any and all claims, demands, suits, or loss, including all costs connected therewith, and for any damages which may be asserted, claimed, or recovered against or from the City of Mason, by reason of personal injury or otherwise, including bodily injury or death and/or property damage, including loss of use thereof, which arises out of, or is in any way connected or associated with (describe event).

_____ *further agrees to procure and maintain during the life of this*
(Name of Company)

agreement, Liability Insurance for events of this nature on an "Occurrence Basis" with limits of liability not less than \$1,000,000 per occurrence and aggregate. Liability insurance, as described above, shall include an endorsement stating the following shall be additional insureds: The City of Mason, all elected and appointed officials, all employees and volunteers, agents, all boards, commissions, and/or authorities and board members, including employees and volunteers thereof. It is understood and agreed by naming the City of Mason as additional insured, coverage afforded is considered to be primary and any other insurance the City of Mason may have in effect shall be considered secondary and/or excess.

 (Applicant signature)

For Office Use Only:

Received by: _____ Date: _____

License Fee Paid:

Reviewed Applicant and All Required Attachments by: _____ Date: _____
Approved by (Council if in ROW): _____ Date: _____
Permit No: _____ Date Issued: _____ Date Expires: _____
Revised 5.31.2018 (Clerk)